



Improving Mississippi's Health One Worksite at a Time

Victor D. Sutton, PhD, MPPA

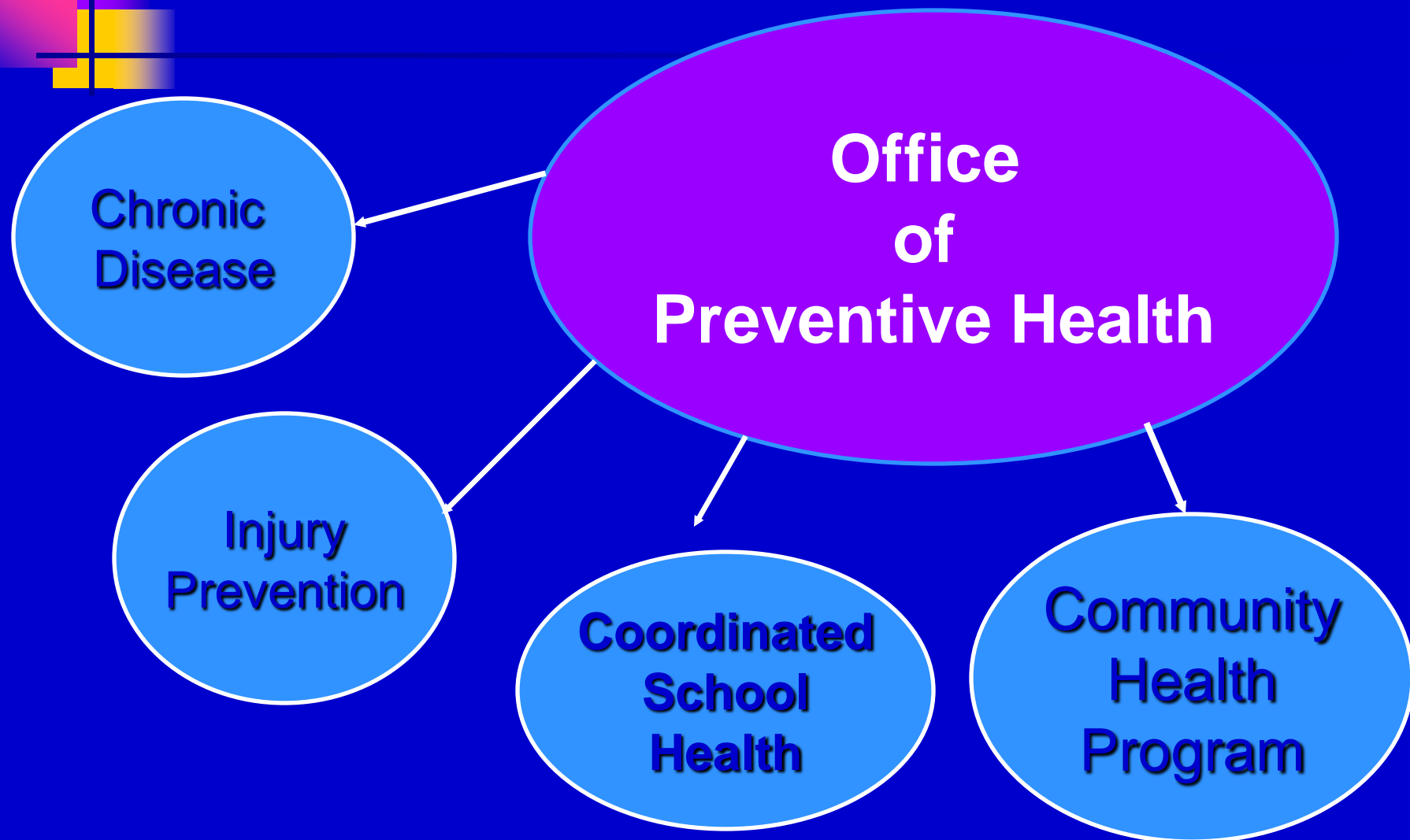
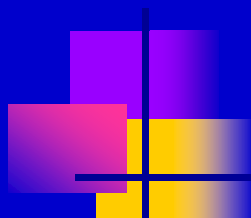
**MS State Department of Health
Office of Preventive Health**

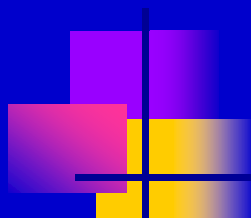




The Office of Preventive Public Health Approach

- **Promote health**
 - Raise public awareness
 - Reduce mutual risk factors for disease.
 - Prevent and control disease with *population-evidence based* strategies
- **Reach out to all communities**





Why We Do It?





Mississippi Ranks...

- 1st in the nation in adult obesity and in adults reporting zero physical activity in the last month.
- 2nd in adult heart disease mortality, diabetes, and hypertension rates.



Mississippi Ranks...

- 3rd highest in intentional injury rate and the highest traffic fatality rate in the nation.
- 7th highest rank in adult smoking almost 25% smoke cigarettes.
- 11th in cancer mortality and 44th in breast cancer incidence.



Mississippi Ranks...

- 19th in breast cancer mortality and 44th in breast cancer incidence.
- 49th in physicians per capita as the average state.

Newsweek

September 4, 2000 : \$3.50

newsweek.msnbc.com

TAX C
SMACK
SAI P

An American Epidemic Diabetes

The silent killer: Scientific research shows a 'persistent explosion' of cases—especially among those in their prime
BY JERRY ADLER AND CLAUDIA KALB

SOMETHING TERRIBLE WAS HAPPENING TO YOLANDA BENTIZ's eyes. They were being poisoned; the fragile capillaries of the retina attacked from within and were leaking blood. The first signs, red lines, appearing vertically across her field of vision, multiplied and merged into a haze that shut out light entirely. "It was like looking through a fog," says her daughter, Jan, a Chicago college student. Bentiz, who was in her late 40s when the problem began four years ago, was a cleaning woman, but she had to stop working. After five surgeries, she has regained vision in one eye, but the other is completely useless. A few weeks ago, awakening one night in a hotel bedroom, she walked into a door, setting off a paroxysm of pain and nausea that hasn't let up yet. And what caused this catastrophe was nothing as exotic as pesticides or emerging viruses. What was poisoning Bentiz was sugar.



46 NEWSWEEK SEPTEMBER 4, 2000

It Strikes
16 Million
Americans
Are You
at Risk?



Computer drawing of a human insulin molecule

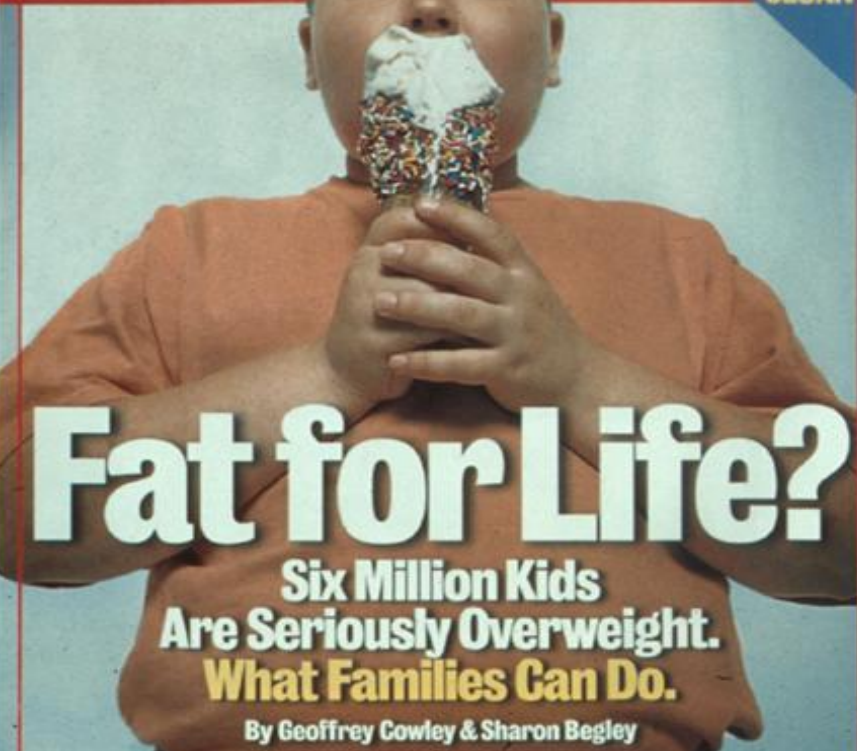
SOCIETY

Heredity
Genes help determine whether you'll get diabetes. In many families, multiple generations are struck. But heredity is not destiny—especially if you eat well and exercise.

HARRY PLAZA: Bentiz (left) and Janine, Bentiz's mother and Janine's daughter, both have complications of the disease.



LIES ABOUT SOCIAL SECURITY BY ALLAN SLOAN



Fat for Life?

Six Million Kids
Are Seriously Overweight.
What Families Can Do.

By Geoffrey Cowley & Sharon Begley

Obesity weighing down taxpayers?

Feds, states paying 50 percent of obesity-related medical costs

By Anne Wolf
Knight Ridder/Tribune Newspapers

CHARLOTTESVILLE, Va. — In the coming decades, the average American lifespan is expected to drop by as much as five years!

That's right—for the first time, the average lifespan is due to drop, and obesity is a major culprit. This will play out, unless the nation works aggressively to slow the rate of obesity, say researchers supported by the National Institute on Aging.

Lead author of the recent NIA report on obesity, Jay Olshansky, observes, "We think today's younger generation will have shorter and less healthy lives than their parents for the first time in modern history unless we intervene."

An obese child is at higher risk to become an obese adult, according to a report from the National Center for Chronic Disease Prevention and Health Promotion.

That child also becomes at higher risk for certain types of cancer, asthma, osteoarthritis, stroke, heart disorders and disease, high blood pressure (hypertension), and ob-gyn complications. These and other problematic health conditions are associated with obesity in adults and have been reported in the medical literature for the last two decades.

Sadly, the U.S. public health and medical systems have been slow to address and intervene on adult obesity, and it continues to increase.

On an individual level, an obese person typically suffers because of discrimination, greater physical pain and lower energy levels. What is the problem with becoming an obese nation if, in many cases, it boils down to personal choices? The problem is that we are all affected.

More obesity equals a greater prevalence of disease, disability, lost productivity and higher health-care costs. Dr. Ken Thorpe, Emory University health policy expert, compared data from the 1987 and 2001 Medical Expenditure Panel Surveys, and found that inflation-adjusted per-capita health care spending rose by \$1,110.

Twenty-seven percent of this growth was attributed to obesity — 12 percent to the increase in the number of obese people and the remainder to faster growth in the health-care expenses among obese people compared to normal-weight

PRO people.

Government entities through Medicare and Medicaid — hence, you and I through taxation — are paying 50 percent of this bill, says Dr. Eric Finkelstein from North Carolina's Research Triangle Institute. As our nation ages, problems related to obesity will grow.

Something must be done — now. Parents, health professionals, schools, employers and government agencies will have to work together to reverse problems stemming from obesity. Of course, See **PRO, 2G**

Inflated numbers, scare tactics overstate scope of social costs

By Dennis T. Avery
Knight Ridder/Tribune Newspaper

WASHINGTON — Obesity will soon be America's No. 1 killer. Sue your local McDonald's. Limit restaurant portions. Put a nagging bureaucrat at every supermarket checkout stand. Oops! That was last year.

The newest advice, from a variety of medical sources, says don't overeat, get more exercise, kick your kids off the couch more often — but don't panic about a couple of pounds.

A year ago, the U.S. Cen-

CON

ters for Disease Control and Prevention was clamoring that obesity was one of the biggest killers of Americans, accounting for more than 400,000 deaths per year. The CDC predicted that overweight would soon become America's leading cause of death.

Embarrassed, the CDC has now recalculated, and says obesity racks up fewer than 26,000 U.S. deaths annually. That's only 6.5 percent as dangerous as it rated obesity last year when it claimed 365,000 annual deaths. How can this be?

The reduced death estimates are partly a result of using more recent data. In addition, "this analysis is far more sophisticated," says University of Chicago biostatistician Mary Grace Kovar, who wasn't involved in either study. "They are very careful and are not overstating their case."

In other words, last year the CDC wanted big death numbers to justify a big public anti-obesity campaign.

Another new study, done by the National Cancer Institute and the CDC, tells us that the high-death risks from being overweight are found mostly among the extremely obese — which includes only 8 percent of Americans. In fact, this study found that people who are somewhat overweight — but not really hefty — have a lower death risk than people with "normal" weights.

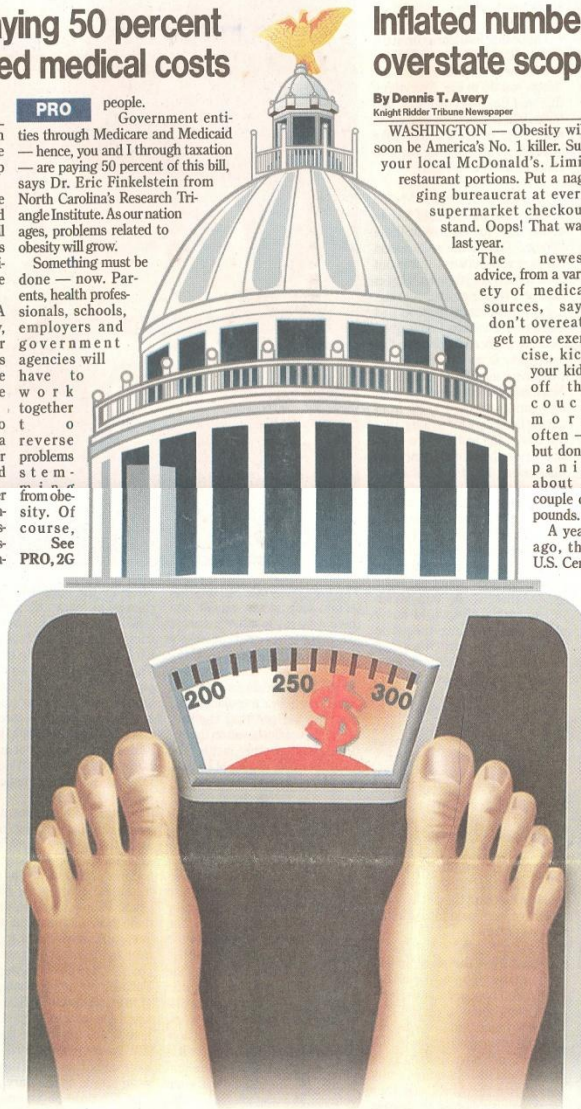
Still another new study published in the *Journal of the American Medical Association* says that even overweight Americans are healthier than ever, thanks to better control of blood pressure and cholesterol. They're often doing it with exercise or prescription drugs and sometimes with an intelligent combination of both.

Diabetes is still a concern, but it's rising among people of all weight classes — not just the fatties.

Americans unquestionably face a weight vs. exercise problem. Most of us have the cash, the cars, the refrigerators and the fast-food restaurants to indulge ourselves in unlimited amounts of sugar, fat and flavor at any time of the night or day.

Few of us are required to burn up many of those calories with physical effort. Men no longer dig ditches by hand. Kids spend more time with TVs and computers — and don't even walk to school any more. Women no longer hoe big gardens

See **CON, 2G**



Staff illustration/The Clarion-Ledger

Study: Annual state obesity tab totals \$757 million

■ State spent annual \$263 per person on obesity-related medical costs in 2003

By Sid Salter
ssalter@clarionledger.com

Mississippi's state and federal taxpayers are subsidizing almost \$500 million annually in obesity-related health care costs because of two simple but interrelated facts — the state's high rate of poverty and the state's high rate of obesity.

"We're going to have to attack it from a policy standpoint," said House Medicaid Committee member Rep. George Flaggs, D-Vicksburg. "I don't think the answer lies in more Medicaid money for obesity-related diseases, but in nutrition and physical education programs in the public school system."

The state ranks No. 1. or No. 2 — depending on which study one chooses to



Flaggs

believe — in the rate of obesity in the nation.

The most recent U.S. Centers for Disease Control study ranked Mississippi No. 1 in obesity prevalence with an obesity rate of 26 percent. A newer study by the Trust for America's Health (TFAH) — a non-profit disease prevention organization — ranks Mississippi as the No. 2 state in the level of adult obesity, but with a higher obesity rate of 28.1 percent.

The prize for those dubious distinctions? The CDC and TFAH studies indicate the

Mississippi spent \$263 per capita or some \$757 million annually on medical costs related to obesity — the 23rd highest amount in the nation.

But because of Mississippi's poverty and high Medicare and Medicaid recipient populations, the more startling number indicated in the studies are the fact that the taxpayers are subsidizing an estimated annual \$223 million in Medicare costs and \$221 million in Medicaid costs that are attributable to obesity.

See RANKING, 2G

ECONOMIC IMPACT OF OBESITY IN MISSISSIPPI BY THE NUMBERS

\$757 Million

Annual expenditures on health care costs attributable to obesity.

\$223 Million

Annual Medicare expenditures on medical costs attributable to obesity.

\$221 Million

Annual Medicaid expenditures on medical costs attributable to obesity.

28.1 percent

Percentage of Mississippi adults classified as obese or overweight.

\$263 per person

Annual expenditures on health care costs attributable to obesity in Mississippi, all sources, including private funding, Med-



Why Worksite Wellness



Six Reasons for Worksite Wellness

1. Health Care Cost
2. Most Illnesses Can Be Avoided
3. The Work Week is Expanding
4. The Technology Revolution is On
5. Employee's Stress Levels are Increasing
6. Increasing Diversity in the Workforce



Risks Factors for Every 100 Employees/Members

25 have cardiovascular disease

12 are asthmatic

6 are diabetic

26 have high blood pressure

30 have high cholesterol

38 are overweight

21 smoke

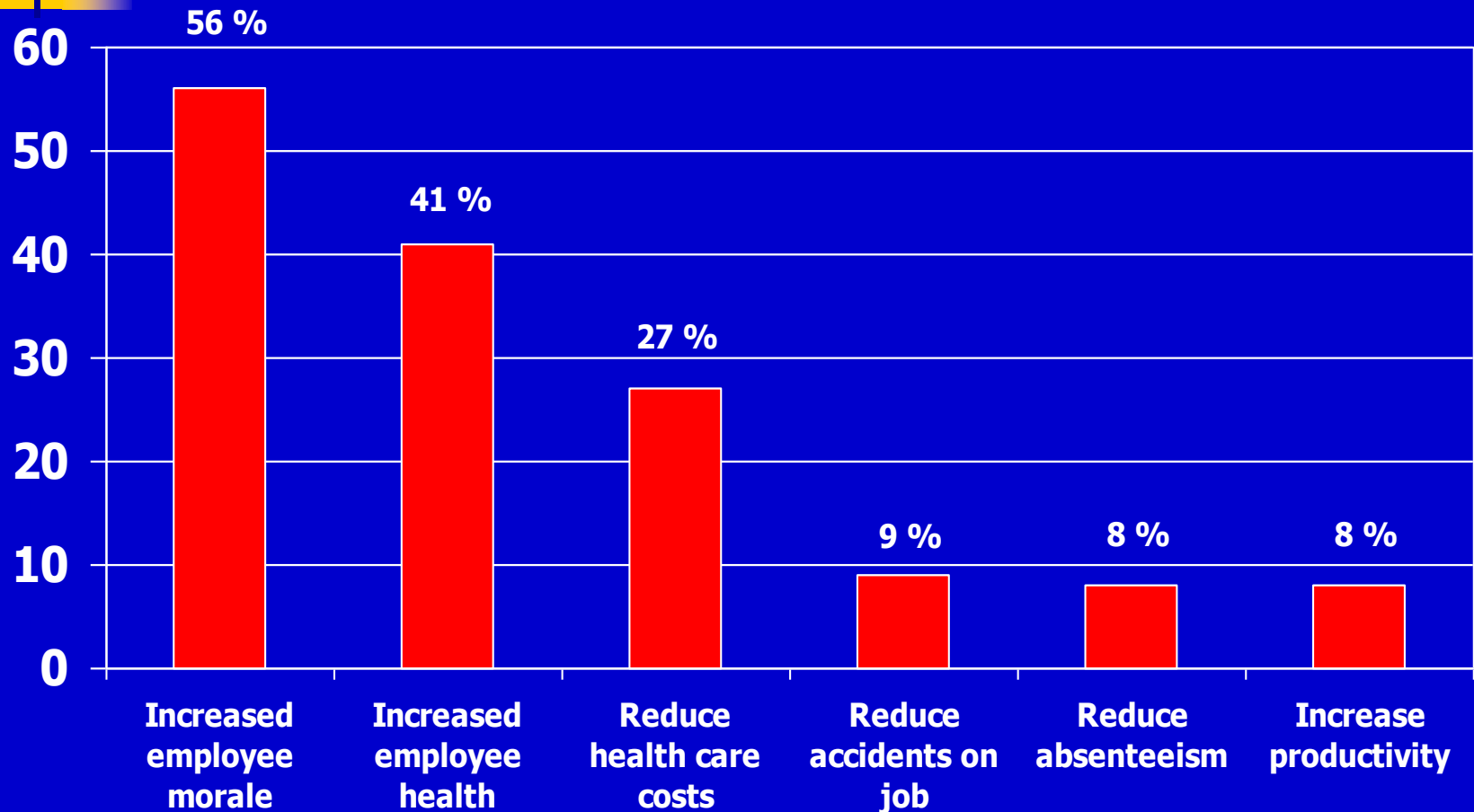
31 use alcohol excessively

20 don't wear seatbelts

24 don't exercise

44 suffer from stress

Benefits of Worksite Wellness Programs

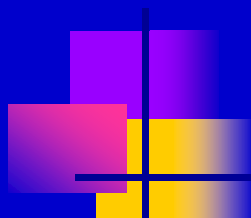


Source: National Business Group on Health, 2005



CDC'S Promising Practices

- Environmental and Policy
 - Enhanced access to opportunities for physical activity combined with health education
- Behavioral Interventions
 - Weight loss competitions and incentives
 - Behavioral Interventions with and without incentives
- Informational and Educational
 - Multicomponent educational practices
 - Exercise prescriptions alone



HOW CAN WE HELP

Community Health Health Educators



District I: Perry Robinson

662-563-5603

District II: Cissy Cox

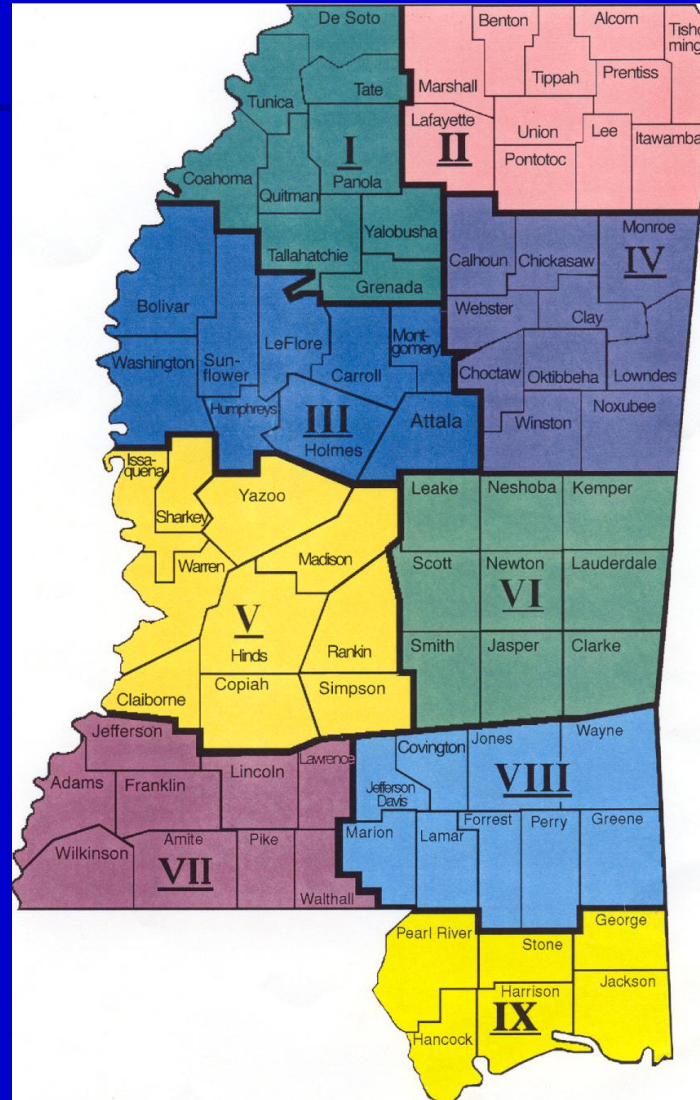
662-841-9015

District III: Desiree
Norwood

662-455-9429

District IV:
Eileen Carr-Tabb
662-323-7313

District V:
Caryn Womack
601-978-7864



District VI: Ashley
McKenzie

601-483-8510

District VII: Carol Wren

601-833-3314

District VIII: Shelia
Lofton

601-544-6766

District IX: Brad
Williams

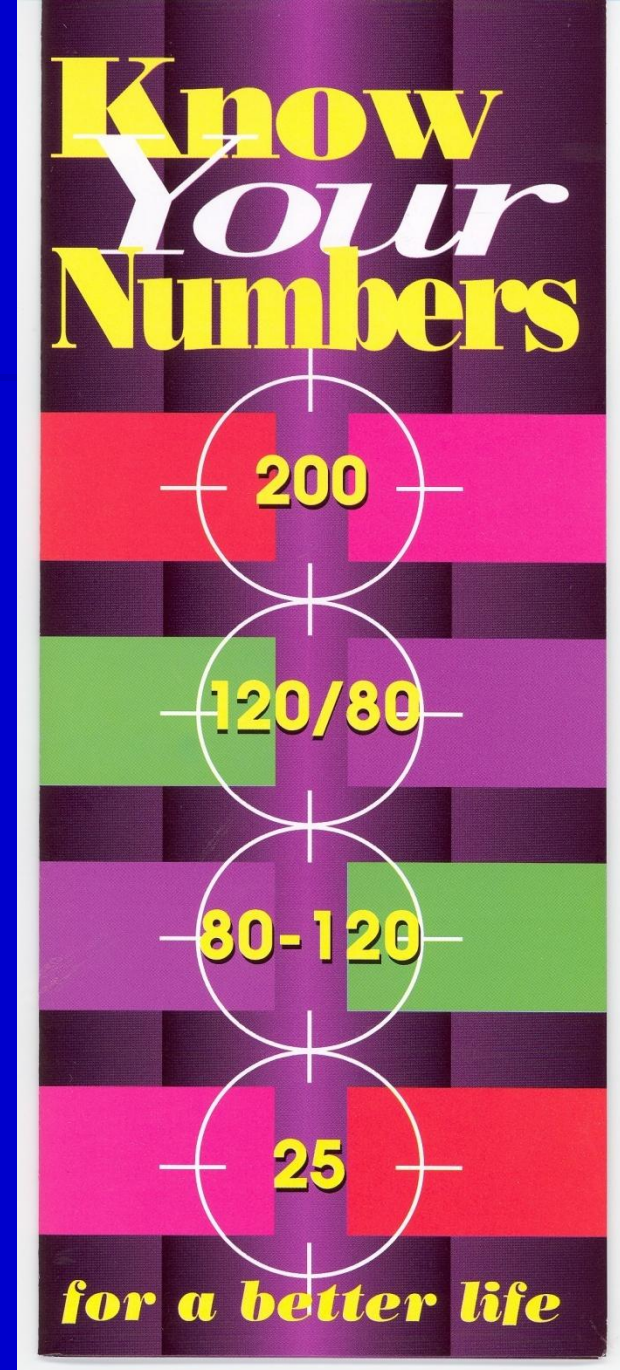
228-831-5151



Resources

Know Your Numbers

- Brochures
- Training



www.HealthyMs.com

Resources



TAKE CHARGE OF YOUR HEALTH

Mississippi State Department of Health

[MSDH Home Page](#)[Health Events](#)[Health Headlines](#)[Search](#)

[Home](#)[Health Toolkits](#)[Healthy Living](#)[Health Knowledge](#)

Welcome



Take Charge of Your Health puts the best in up-to-date health information at your fingertips. Our goal is to equip you with the tools to start living a healthier life today.

Start by choosing a **Health Toolkit** that's right for you, or take our **Health Awareness Quiz** for a quick tour of facts about healthy living.

Get the latest in health with our [free e-mail newsletters](#)

- **Health Toolkits:** Nutrition, Exercise, Cancer, High Blood Pressure, and more
- **Healthy Living:** Information for building a healthier life
- **Health Awareness Quiz:** Test your healthy living knowledge



LT GOVERNORS' CHALLENGE

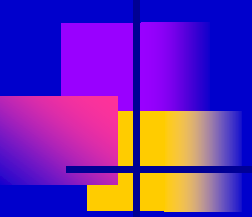


Resources, continued...

Health Toolkits

- Cancer
- Diabetes
- Heart Disease
- Injury Prevention
- Mental Health
- Nutrition
- Oral Health
- Physical Activity
- Tobacco Cessation

More Resources

- 
-
- Health Calculator
 - Health Awareness Quiz
 - Calendar of Health Screenings
 - Links to all Health Programs at the Mississippi Department of Health

West Nile Virus Prevention

Mosquito repellents are your first line of defense against West Nile virus

Any time spent outdoors exposes you to mosquitoes and the risk of being bitten. Mosquito repellents can help protect you when other defenses can't — if you choose the right one.

DEET is Proven Protection



Repellents containing DEET in concentrations from 7% to 50% can effectively repel mosquitoes for up to ten hours. DEET's greatest advantage is consistent performance at low or high concentrations — higher concentrations repel mosquitoes longer, but not necessarily better. **Choose the concentration** that suits the amount of time you will be exposed to mosquitoes. To avoid possible skin reactions, do not use products exceeding 10% DEET on children.

Effective Alternatives to DEET

Many products are on the market that claim to be effective repellents. The ones below have been scientifically tested for safety and effectiveness.

- **Picaridin:** Picaridin is an effective alternative to DEET products, providing long-lasting protection against mosquito bites. Picaridin is nearly odorless, does not cause skin irritation, and provides protection similar to the same concentrations of DEET.
- **Permethrin:** Permethrin is designed for use on clothing, not skin, and is highly effective as an insecticide and as a repellent. Permethrin-treated clothing repels and kills ticks, mosquitoes, and other insects and retains this effect after repeated laundering. Products containing permethrin are recommended for use on clothing, shoes, bed nets, and camping gear.
- **Oil of Lemon Eucalyptus:** PMD is the synthesized version of oil of lemon eucalyptus. Repellents containing PMD provide protection similar to those which contain low concentrations of DEET. (Essential, or "pure" oil of lemon eucalyptus has not received similar testing for effectiveness and is not a recognized insect repellent.) PMD is not for use on children less than 3 years old.



e-Tip: **Pick the Right Repellent**

Choose a repellent that's proven to work for the amount of time you need it.





Contact Info:

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